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SERIAL NO. 10/084,709

FROM: Jack D. Slobod
REGISTRATION NUMBER: 26,236

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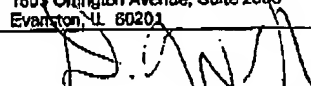
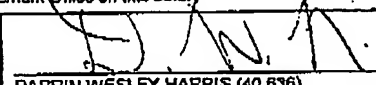
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	GB 010034 (7790/245)
	Application Number	10/084,709
	Filing Date	FEBRUARY 25, 2002
	First Named Inventor	KEVIN R. BOYLE
	Group Art Unit	2821
	Examiner	CLINGER, JAMES C.

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to a Final Office Action Dated May 27, 2003 <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Petition for Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interventions <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Indep.	Minus		0	x \$42=	0		x \$84=	
First Presentation of Multiple Dep. Claim				+ \$140=			+ \$280=	
				total add'l fee	\$ 0		total add'l fee	\$ 3

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
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